

Fill in this information to identify your case:

United States Bankruptcy Court for the:

**Western District of Missouri**

Case number (*If known*): \_\_\_\_\_ Chapter you are filing under:

- Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

Check if this is an amended filing

**Official Form 101**

**Voluntary Petition for Individuals Filing for Bankruptcy**

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

**About Debtor 1:**

**1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

**Gary**

First name

Middle name

**Zink**

Last name

Suffix (Sr., Jr, II, III)

**About Debtor 2 (Spouse Only in a Joint Case):**

**Pamela**

First name

Middle name

**Zink**

Last name

Suffix (Sr., Jr, II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

First name

Middle name

Last name

Business name (if applicable)

Business name (if applicable)

First name

Middle name

Last name

Business name (if applicable)

Business name (if applicable)

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

xxx - xx - 7 6 1 4

OR

9xx - xx - \_\_\_\_\_

xxx - xx - 2 4 1 1

OR

9xx - xx - \_\_\_\_\_

Debtor 1  
Debtor 2

Gary  
Pamela

First Name

Zink  
Zink

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

4. Your Employer Identification Number (EIN), if any.

— - - - -

EIN

5. Where you live

**1122 Moreau Dr.**

Number Street

**Jefferson City, MO 65101**

City State ZIP Code

**Cole**

County

If your mailing address is different from the one above,  
fill it in here. Note that the court will send any notices to  
you at this mailing address.

Number Street

P.O. Box

City State ZIP Code

If Debtor 2 lives at a different address:

Number Street

City State ZIP Code

County

If Debtor 2's mailing address is different from yours, fill  
it in here. Note that the court will send any notices to you  
at this mailing address.

Number Street

P.O. Box

City State ZIP Code

6. Why you are choosing *this district* to file for bankruptcy

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain.  
(See 28 U.S.C. § 1408)

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Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain.  
(See 28 U.S.C. § 1408)

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Debtor 1  
Debtor 2

Gary  
Pamela

First Name

Zink  
Zink

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*

- Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

8. **How you will pay the fee**

- I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.  
 **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).  
 **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. **Have you filed for bankruptcy within the last 8 years?**

No.

Yes. District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY  
District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY  
District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

No.

Yes. Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY  
Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
MM / DD / YYYY

11. **Do you rent your residence?**

No. Go to line 12.

Yes. Has your landlord obtained an eviction judgment against you?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1  
Debtor 2

Gary  
Pamela

Zink  
Zink

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

Part 3: Report About Any Businesses You Own as a Sole Proprietor

**12. Are you a sole proprietor of any full- or part-time business?**

No. Go to Part 4.

Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City

State

ZIP Code

*Check the appropriate box to describe your business:*

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Debtor 1  
Debtor 2

**Gary**  
**Pamela**

First Name

**Zink**  
**Zink**

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

No.

Yes. What is the hazard? \_\_\_\_\_  
\_\_\_\_\_

If immediate attention is needed, why is it needed?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Where is the property?

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Debtor 1  
Debtor 2

**Gary**  
**Pamela**

First Name

Middle Name

**Zink**  
**Zink**

Last Name

Case number (if known) \_\_\_\_\_

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

- I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1  
Debtor 2

**Gary**  
**Pamela**

First Name

Middle Name

**Zink**  
**Zink**

Last Name

Case number (if known) \_\_\_\_\_

**Part 6: Answer These Questions for Reporting Purposes**

**16. What kind of debts do you have?**

**16a. Are your debts primarily consumer debts?** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- No. Go to line 16b.  
 Yes. Go to line 17.

**16b. Are your debts primarily business debts?** Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- No. Go to line 16c.  
 Yes. Go to line 17.

**16c. State the type of debts you owe that are not consumer debts or business debts.**

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**17. Are you filing under Chapter 7?**

**Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**

- No. I am not filing under Chapter 7. Go to line 18.

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

- No  
 Yes

**18. How many creditors do you estimate that you owe?**

- 1-49       1,000-5,000       25,001-50,000       50,000-100,000       More than 100,000  
 50-99       5,001-10,000  
 100-199       10,001-25,000  
 200-999

**19. How much do you estimate your assets to be worth?**

- \$0-\$50,000       \$1,000,001-\$10 million       \$500,000,001-\$1 billion  
 \$50,001-\$100,000       \$10,000,001-\$50 million       \$1,000,000,001-\$10 billion  
 \$100,001-\$500,000       \$50,000,001-\$100 million       \$10,000,000,001-\$50 billion  
 \$500,001-\$1 million       \$100,000,001-\$500 million       More than \$50 billion

**20. How much do you estimate your liabilities to be?**

- \$0-\$50,000       \$1,000,001-\$10 million       \$500,000,001-\$1 billion  
 \$50,001-\$100,000       \$10,000,001-\$50 million       \$1,000,000,001-\$10 billion  
 \$100,001-\$500,000       \$50,000,001-\$100 million       \$10,000,000,001-\$50 billion  
 \$500,001-\$1 million       \$100,000,001-\$500 million       More than \$50 billion

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** /s/ Gary Zink

Gary Zink, Debtor 1

Executed on 05/07/2024

MM/ DD/ YYYY

**X** /s/ Pamela Zink

Pamela Zink, Debtor 2

Executed on 05/07/2024

MM/ DD/ YYYY

Debtor 1  
Debtor 2

**Gary**  
**Pamela**

First Name

Middle Name

**Zink**  
**Zink**

Last Name

Case number (if known) \_\_\_\_\_

**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

X

/s/ Dominic Pontello

Signature of Attorney for Debtor

Date 05/07/2024

MM / DD / YYYY

**Dominic Pontello**

Printed name

**Pontello & Bressler, LLC**

Firm name

**406 Boones Lick Rd.**

Number Street

**Saint Charles**

City

**MO**

State **63301** ZIP Code

Contact phone (636) 896-4170

Email address dominic@pontellolaw.com

**60947**

Bar number

**MO**

State

Fill in this information to identify your case and this filing:

Debtor 1	<b>Gary</b>	<b>Zink</b>
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	<b>Pamela</b>	<b>Zink</b>
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	<b>Western</b>	District of <b>Missouri</b>
Case number		

Check if this is an amended filing

Official Form 106A/BSchedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In****1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

No. Go to Part 2.

Yes. Where is the property?

**1.1 Burial lots**

Street address, if available, or other description

**Mt Hope Cemetery & Mausoleum****Saint Louis, MO 63125**

City      State      ZIP Code

**St. Louis County**

County

**What is the property? Check all that apply.**

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other **Burial lots**

**Who has an interest in the property? Check one.**

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?**

**\$2,500.00**

**Current value of the portion you own?**

**\$2,500.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Fee Simple**

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

**2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here →**

**\$2,500.00**

**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.**

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

No

Yes

Debtor Zink, Gary; Zink, Pamela

Case number (if known) \_\_\_\_\_

3.1	Make: <u>Dodge</u>	<b>Who has an interest in the property?</b> Check one.		
	Model: <u>Caravan</u>	<input type="checkbox"/> Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Year: <u>2019</u>	<input type="checkbox"/> Debtor 2 only		
	Approximate mileage: <u>55000</u>	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		
		<input type="checkbox"/> At least one of the debtors and another		
		<input type="checkbox"/> <b>Check if this is community property (see instructions)</b>	<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
			<u>\$19,000.00</u>	<u>\$19,000.00</u>

Other information:

If you own or have more than one, describe here:

3.2	Make: <u>Chrysler</u>	<b>Who has an interest in the property?</b> Check one.		
	Model: <u>Town and Country</u>	<input type="checkbox"/> Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Year: <u>2014</u>	<input type="checkbox"/> Debtor 2 only		
	Approximate mileage: <u>112000</u>	<input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only		
		<input type="checkbox"/> At least one of the debtors and another		
		<input type="checkbox"/> <b>Check if this is community property (see instructions)</b>	<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
			<u>\$9,000.00</u>	<u>\$9,000.00</u>

Other information:

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories***Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No Yes

4.1	Make: _____	<b>Who has an interest in the property?</b> Check one.		
	Model: _____	<input type="checkbox"/> Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
	Year: _____	<input type="checkbox"/> Debtor 2 only		
		<input type="checkbox"/> Debtor 1 and Debtor 2 only		
		<input type="checkbox"/> At least one of the debtors and another		
		<input type="checkbox"/> <b>Check if this is community property (see instructions)</b>	<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
			_____	_____

Other information:

**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here ..... →**\$28,000.00**Part 3: Describe Your Personal and Household Items****Do you own or have any legal or equitable interest in any of the following items?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware No Yes. Describe. ....**Household goods and furnishings**\$100.00

Debtor Zink, Gary; Zink, Pamela

Case number (if known) \_\_\_\_\_

**7. Electronics**

*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

 No Yes. Describe. ....
**8. Collectibles of value**

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe. ....
**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe. ....
**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

 No Yes. Describe. ....
**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

 No Yes. Describe. ....

\$450.00

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No Yes. Describe. ....

\$500.00

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

 No Yes. Describe. ....
**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information. ....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here ..... →

\$1,050.00

#### Part 4: Describe Your Financial Assets

**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?  
Do not deduct secured claims or exemptions.**

16. **Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes .....

Cash: .....

\$20.00

17. **Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes .....

Institution name:

17.1. Checking account:	<u>First Community Credit Union</u>	\$1,200.00
17.2. Checking account:	<u>Regions</u>	\$1,500.00
17.3. Savings account:	<u>First Community Credit Union</u>	\$25.00

18. **Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes .....

Institution or issuer name:

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19. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

No

Yes. Give specific information about them.....

Name of entity:

% of ownership:

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**20. Government and corporate bonds and other negotiable and non-negotiable instruments***Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them.....

Issuer name:

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**21. Retirement or pension accounts***Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: Institution name:

401(k) or similar plan: 

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Pension plan: 

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IRA: 

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Retirement account: 

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Keogh: 

---

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Additional account: 

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---

Additional account: 

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**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes .....

Institution name or individual:

Electric: 

---

---

Gas: 

---

---

Heating oil: 

---

---

Security deposit on rental unit: 

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---

Prepaid rent: 

---

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Telephone: 

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Water: 

---

---

Rented furniture: 

---

---

Other: 

---

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Debtor Zink, Gary; Zink, Pamela

Case number (if known) \_\_\_\_\_

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

No

Yes ..... Issuer name and description:

---



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**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes ..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

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**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them. ....

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them. ....

**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them. ....

**Money or property owed to you?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years. ....

Federal:

---

State:

---

Local:

---

Debtor Zink, Gary; Zink, Pamela

Case number (if known) \_\_\_\_\_

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

 No Yes. Give specific information. ....

Alimony:
Maintenance:
Support:
Divorce settlement:
Property settlement:

Alimony: \_\_\_\_\_  
 Maintenance: \_\_\_\_\_  
 Support: \_\_\_\_\_  
 Divorce settlement: \_\_\_\_\_  
 Property settlement: \_\_\_\_\_

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information. ....

_____
_____

**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

**Whole Life Policy with  
Prudential**  
\_\_\_\_\_

\$2,425.14

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information. ....

_____
_____

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim. ....

_____
_____

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim. ....

_____
_____

**35. Any financial assets you did not already list** No Yes. Give specific information. ....

_____
_____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here ..... → \$5,170.14

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

37. Do you own or have any legal or equitable interest in any business-related property?

- No. Go to Part 6.  
 Yes. Go to line 38.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

- No  
 Yes. Describe. ....

--	--

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- No  
 Yes. Describe. ....

--	--

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- No  
 Yes. Describe. ....

--	--

41. Inventory

- No  
 Yes. Describe. ....

--	--

42. Interests in partnerships or joint ventures

- No  
 Yes. Describe. ....

Name of entity:	% of ownership:	
<u>KBosh Food LLC</u>	<u>100.00%</u>	<u>\$0.00</u>

43. Customer lists, mailing lists, or other compilations

- No  
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  
 No  
 Yes. Describe. ....

--	--

## 44. Any business-related property you did not already list

 No Yes. Give specific information .....

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---

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## 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here ..... →

\$0.00

**Part 6:** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
If you own or have an interest in farmland, list it in Part 1.

## 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

 No. Go to Part 7. Yes. Go to line 47.

**Current value of the portion you own?**  
Do not deduct secured claims or exemptions.

## 47. Farm animals

Examples: Livestock, poultry, farm-raised fish

 No Yes .....

\_\_\_\_\_

## 48. Crops—either growing or harvested

 No Yes. Give specific information. .....

\_\_\_\_\_

## 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

 No Yes .....

\_\_\_\_\_

## 50. Farm and fishing supplies, chemicals, and feed

 No Yes .....

\_\_\_\_\_

Debtor Zink, Gary; Zink, Pamela

Case number (if known) \_\_\_\_\_

## 51. Any farm- and commercial fishing-related property you did not already list

 No Yes. Give specific information. ....

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## 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here ..... →

\$0.00

## Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

## 53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

 No Yes. Give specific information. ....


## 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... →

\$0.00

## Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 ..... → \$2,500.0056. Part 2: Total vehicles, line 5 \$28,000.0057. Part 3: Total personal and household items, line 15 \$1,050.0058. Part 4: Total financial assets, line 36 \$5,170.1459. Part 5: Total business-related property, line 45 \$0.0060. Part 6: Total farm- and fishing-related property, line 52 \$0.0061. Part 7: Total other property not listed, line 54 + \$0.0062. Total personal property. Add lines 56 through 61. .... → \$34,220.14 Copy personal property total → + \$34,220.1463. Total of all property on Schedule A/B. Add line 55 + line 62. .... \$36,720.14

Fill in this information to identify your case:

Debtor 1	<u>Gary</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Pamela</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Missouri</u>		
Case number (if known)			

Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

1.  You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

#### 2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Check only one box for each exemption.	
Brief description: <b>Burial lots</b> Mt Hope Cemetery & Mausoleum Saint Louis, MO 63125	\$2,500.00	<input checked="" type="checkbox"/> \$2,500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mo. Rev. Stat. § 214.190</b> _____ _____
Line from Schedule A/B: <u>1.1</u>			
Brief description: <b>2019 Dodge Caravan</b>	\$19,000.00	<input checked="" type="checkbox"/> \$1,588.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mo. Rev. Stat. § 513.430.1(5)</b> _____ _____
Line from Schedule A/B: <u>3.1</u>			

#### 3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

Debtor 1 Debtor 2	<b>Gary Pamela</b>	<b>Zink Zink</b>	Case number (if known) _____
	First Name	Middle Name	Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
Brief description: <b>2014 Chrysler Town and Country</b>	\$9,000.00	<input checked="" type="checkbox"/> \$0.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mo. Rev. Stat. § 513.430.1(5)</b> _____ _____
Line from Schedule A/B: <b>3.2</b>			
Brief description: <b>Household goods and furnishings</b>	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mo. Rev. Stat. § 513.430.1(1)</b> _____ _____
Line from Schedule A/B: <b>6</b>			
Brief description: <b>Clothes</b>	\$450.00	<input checked="" type="checkbox"/> \$450.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mo. Rev. Stat. § 513.430.1(1)</b> _____ _____
Line from Schedule A/B: <b>11</b>			
Brief description: <b>Jewelry</b>	\$500.00	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mo. Rev. Stat. § 513.430.1(2)</b> _____ _____
Line from Schedule A/B: <b>12</b>			
Brief description: <b>Cash</b>	\$20.00	<input checked="" type="checkbox"/> \$20.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mo. Rev. Stat. § 513.430.1(3)</b> _____ _____
Line from Schedule A/B: <b>16</b>			
Brief description: <b>First Community Credit Union Checking account</b>	\$1,200.00	<input checked="" type="checkbox"/> \$1,200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>42 U.S.C. § 407</b> _____ _____
Line from Schedule A/B: <b>17</b>			
Brief description: <b>First Community Credit Union Savings account</b>	\$25.00	<input checked="" type="checkbox"/> \$25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mo. Rev. Stat. § 513.430.1(3)</b> _____ _____
Line from Schedule A/B: <b>17</b>			
Brief description: <b>Regions Checking account</b>	\$1,500.00	<input checked="" type="checkbox"/> \$1,155.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mo. Rev. Stat. § 513.430.1(3)</b> _____ _____
Line from Schedule A/B: <b>17</b>			

Debtor 1  
Debtor 2

**Gary**  
**Pamela**  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
<b>Brief description:</b> <b>Whold Life Policy with Prudential</b>	<b>\$2,425.14</b>	<input checked="" type="checkbox"/> <b>\$2,425.14</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Mo. Rev. Stat. § 513.430.1(7)</b> _____ _____
<b>Line from Schedule A/B:</b> <u>31</u>			

Fill in this information to identify your case:

Debtor 1	<u>Gary</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Pamela</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>Western</u>		District of	<u>Missouri</u>
Case number (if known) _____			

Check if this is an amended filing

Official Form 106DSchedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

## 1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

## Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.1 <b>First Community Credit Union</b> Creditor's Name <u>Attn: Bankruptcy</u>  <b>PO Box 1030</b> Number Street <b>Chesterfield, MO 63006</b> City State ZIP Code  Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim relates to a community debt  Date debt was incurred <u>12/1/2022</u> Last 4 digits of account number <u>0 5 0 4</u>	<b>Describe the property that secures the claim:</b>  <u>2019 Dodge Caravan</u>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Nature of lien.</b> Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	<b>\$17,412.00</b>	<b>\$19,000.00</b>	<b>\$0.00</b>
Add the dollar value of your entries in Column A on this page. Write that number here: <u>\$17,412.00</u>				

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name Middle Name

Last Name

Part 1:	Additional Page  After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		
Column A	Column B	Column C	
<b>Amount of claim</b> Do not deduct the value of collateral.	<b>Value of collateral that supports this claim</b>	<b>Unsecured portion</b> If any	
<b>2.2 First Community Credit Union</b>	Describe the property that secures the claim: <b>\$9,023.00</b>		
Creditor's Name  <b>Attn: Bankruptcy</b>	<b>2014 Chrysler Town and Country</b>		
PO Box 1030 Number Street <b>Chesterfield, MO 63006</b>	As of the date you file, the claim is: Check all that apply.		
City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Who owes the debt? Check one.	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt		
Date debt was incurred <b>12/1/2022</b>	Last 4 digits of account number <b>0 5 0 3</b>		
Add the dollar value of your entries in Column A on this page. Write that number here: <b>\$9,023.00</b>			
If this is the last page of your form, add the dollar value totals from all pages. Write that number here: <b>\$26,435.00</b>			

Fill in this information to identify your case:

Debtor 1	<u>Gary</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Pamela</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western</u>		District of <u>Missouri</u>
Case number (if known)			

Check if this is an amended filing

Official Form 106E/FSchedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim
4.1	<b>Amazon Capital Services</b> Nonpriority Creditor's Name <b>410 Terry Ave N</b> Number Street <b>Seattle, WA 98109</b> City State ZIP Code	Last 4 digits of account number <u>5 7 7 2</u> <b>\$13,112.95</b>
		When was the debt incurred? _____
		As of the date you file, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
		Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

## Part 2:

**Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.2 Ameren</b> Nonpriority Creditor's Name <b>PO Box 88068</b> Number Street <b>Chicago, IL 60680</b> City State ZIP Code	Last 4 digits of account number _____ <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$303.58</b>	
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Utility</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.3 American Express</b> Nonpriority Creditor's Name <b>PO Box 6031</b> Number Street <b>Carol Stream, IL 60197</b> City State ZIP Code		Last 4 digits of account number <u>4 0 0 4</u> <b>When was the debt incurred?</b> _____  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$30,292.33</b>
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

GaryZink

Case number (if known) \_\_\_\_\_

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

**4.4 American Express Gold**Last 4 digits of account number 2 0 0 3\$27,930.97

Nonpriority Creditor's Name

**PO Box 6031**

When was the debt incurred? \_\_\_\_\_

Number Street

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

**Carol Stream, IL 60197**

City

State

ZIP Code

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

**4.5 Amex**Last 4 digits of account number 6 9 5 3\$30,292.00

Nonpriority Creditor's Name

**Correspondence/Bankruptcy**When was the debt incurred? 5/1/2012**PO Box 981540**

Number Street

**EI Paso, TX 79998-1540**

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify CreditCard

Is the claim subject to offset?

- No  
 Yes

Debtor 1

GaryZink

Case number (if known) \_\_\_\_\_

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.6</b> <u>Attentive Mobile Inc.</u> Nonpriority Creditor's Name <u>221 River St. 9047</u> Number Street  <u>Hoboken, NJ 07030</u> City State ZIP Code	Last 4 digits of account number <u>4 9 1 9</u>  <u>When was the debt incurred?</u>  <u>As of the date you file, the claim is:</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,291.01</u>
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Vendor</u>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>4.7</b> <u>Bug Out</u> Nonpriority Creditor's Name <u>PO Box 740608</u> Number Street  <u>Cincinnati, OH 45274</u> City State ZIP Code		
Last 4 digits of account number <u>9 5 0 7</u>  <u>When was the debt incurred?</u>  <u>As of the date you file, the claim is:</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Vendor</u>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.8	<b>CFNA</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b>	Last 4 digits of account number	<u>3</u> <u>4</u> <u>6</u> <u>2</u>	\$5,808.00
		When was the debt incurred?	<u>8/1/2018</u>	
<b>PO Box 81315</b> Number Street <b>Cleveland, OH 44181-0315</b>		As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Who incurred the debt? Check one.</b>		<b>Type of NONPRIORITY unsecured claim:</b>		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>ChargeAccount</u>		
<b>Is the claim subject to offset?</b>				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.9	<b>Chase Card Services</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b>	Last 4 digits of account number	<u>9</u> <u>3</u> <u>2</u> <u>0</u>	\$19,492.00
		When was the debt incurred?	<u>9/1/2012</u>	
<b>P.O. 15298</b> Number Street <b>Wilmington, DE 19850</b>		As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Who incurred the debt? Check one.</b>		<b>Type of NONPRIORITY unsecured claim:</b>		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
<b>Is the claim subject to offset?</b>				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

GaryZink

Case number (if known) \_\_\_\_\_

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.10	<b>Citibank</b> Nonpriority Creditor's Name <u>Citicorp Cr Svcs/Centralized Bankruptcy</u>	Last 4 digits of account number	<u>1</u> <u>2</u> <u>2</u> <u>1</u>	\$10,262.00
	PO Box 790040 Number Street <b>St Louis, MO 63179-0040</b>	When was the debt incurred?	<u>10/1/2023</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.11	<b>Costco Citi Card</b> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u>	Last 4 digits of account number	<u>1</u> <u>6</u> <u>8</u> <u>9</u>	\$16,360.00
	PO Box 6500 Number Street <b>Sioux Falls, SD 57117</b>	When was the debt incurred?	<u>2/1/2019</u>	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

GaryZink

Case number (if known) \_\_\_\_\_

Debtor 2

PamelaZink

First Name

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Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.12	<b>Discover Financial</b> Nonpriority Creditor's Name <b>Attn: Bankruptcy</b>	Last 4 digits of account number	<u>4 8 8 0</u>	\$7,981.00
	Number Street <b>New Albany, OH 43054</b>	When was the debt incurred?	<u>10/1/2023</u>	
	City State ZIP Code	<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Who incurred the debt?</b> Check one.	<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
	<b>Type of NONPRIORITY unsecured claim:</b>	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
	<b>Is the claim subject to offset?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.13	<b>Emotive</b> Nonpriority Creditor's Name <b>11390 W Olympic Blvd</b>	Last 4 digits of account number	<u>      </u> \$153.26	
	Number Street <b>Los Angeles, CA 90015</b>	When was the debt incurred?	<u>      </u>	
	City State ZIP Code	<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	<b>Who incurred the debt?</b> Check one.	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
	<b>Type of NONPRIORITY unsecured claim:</b>	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Income taxes over three years old</u>		
	<b>Is the claim subject to offset?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

GaryZink

Debtor 2

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First Name

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Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.14	<b>Fed Ex</b> Nonpriority Creditor's Name <b>PO Box 94515</b> Number      Street	Last 4 digits of account number	1    3    3    6	\$94.34
		When was the debt incurred? _____		
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Vendor</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.15	<b>Goldman Saks Bank</b> Nonpriority Creditor's Name <b>PO Box 45400</b> Number      Street	Last 4 digits of account number	\$17,450.22	
		When was the debt incurred? _____		
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

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Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.16 Griff Paper and Film</b> Nonpriority Creditor's Name <u>275 Lower Morrisville Rd</u> Number              Street  <u>Levittown, PA 19054</u> City                State                ZIP Code	Last 4 digits of account number _____  When was the debt incurred? _____	<b>\$1,875.00</b>
<b>As of the date you file, the claim is:</b> Check all that apply.		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Type of NONPRIORITY unsecured claim:</b>		
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Vendor</u>		
<b>Who incurred the debt?</b> Check one.		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
<b>Is the claim subject to offset?</b>		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>4.17 I44 Cold Storage</b> Nonpriority Creditor's Name <u>4550 W Junction St.</u> Number              Street  <u>Springfield, MO 65802</u> City                State                ZIP Code		
Last 4 digits of account number _____  When was the debt incurred? _____		
<b>As of the date you file, the claim is:</b> Check all that apply.		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Type of NONPRIORITY unsecured claim:</b>		
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Vendor</u>		
<b>Who incurred the debt?</b> Check one.		
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
<b>Is the claim subject to offset?</b>		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim \_\_\_\_\_

4.18	<b>IHeart Media</b>	Last 4 digits of account number	_____	unknown
Nonpriority Creditor's Name		When was the debt incurred?		
<b>5500 Pearl St. 250</b>				
Number	Street	As of the date you file, the claim is: Check all that apply.		
<b>Des Plaines, IL 60018</b>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
City	State	ZIP Code	Type of NONPRIORITY unsecured claim:	
			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Vendor</u>	
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.19	<b>Intuit Financing Inc.</b>	Last 4 digits of account number	_____	\$38,367.97
Nonpriority Creditor's Name		When was the debt incurred?		
<b>2700 Cast Ave</b>				
Number	Street	As of the date you file, the claim is: Check all that apply.		
<b>Mountain View, CA 94043</b>		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
City	State	ZIP Code	Type of NONPRIORITY unsecured claim:	
			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>	
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

GaryZink

Case number (if known) \_\_\_\_\_

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.20	<b>Kapitus Servicing</b> Nonpriority Creditor's Name <b>2500 Wilson Blvd. 350</b> Number Street <b>Arlington, VA 22201</b> City State ZIP Code	Last 4 digits of account number <b>8 3 1 1</b>	\$45,201.00
		When was the debt incurred?	_____
As of the date you file, the claim is: Check all that apply.			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Who incurred the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.21 <b>Paypal Working Capital</b> Nonpriority Creditor's Name <b>Executive Escalation</b> <b>PO Box 45950</b> Number Street <b>Omaha, NE 68145</b> City State ZIP Code		Last 4 digits of account number _____	\$2,592.14
		When was the debt incurred?	_____
As of the date you file, the claim is: Check all that apply.			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Who incurred the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.22	<b>Pentagon Federal Credit Union</b>	Last 4 digits of account number	<u>6 8 6 7</u>	\$3,986.00
Nonpriority Creditor's Name		When was the debt incurred?		
<b>Attn: Bankruptcy</b>		<u>10/1/2023</u>		
<b>2930 Eisenhower Avenue</b>		As of the date you file, the claim is: Check all that apply.		
Number Street		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Alexandria, VA 22314</b>				
City	State	ZIP Code		
<b>Who incurred the debt? Check one.</b>				
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>				
<b>Type of NONPRIORITY unsecured claim:</b>				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>				
<b>Is the claim subject to offset?</b>				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.23	<b>Rapid Finance</b>	Last 4 digits of account number	—————	\$29,321.17
Nonpriority Creditor's Name		When was the debt incurred?		
<b>4500 East West Highway</b>		<u>—————</u>		
Number	Street			
<b>Bethesda, MD 20814</b>		As of the date you file, the claim is: Check all that apply.		
City State ZIP Code		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Who incurred the debt? Check one.</b>				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>				
<b>Type of NONPRIORITY unsecured claim:</b>				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>				
<b>Is the claim subject to offset?</b>				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

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Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.24</b> <u>Republic Services</u> Nonpriority Creditor's Name <u>12976 St. Charles Rock Rd.</u> Number              Street  <u>Bridgeton, MO 63044</u> City                State                ZIP Code	Last 4 digits of account number _____ <b>\$509.90</b>  When was the debt incurred? _____
<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Vendor</u>	
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>4.25</b> <u>Route App</u> Nonpriority Creditor's Name <u>1557 W Innovation Way 200</u> Number              Street  <u>Lehi, UT 84043</u> City                State                ZIP Code	
Last 4 digits of account number _____ <b>\$644.01</b>  When was the debt incurred? _____	
<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Vendor</u>	
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

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**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.26	<b>SBA</b> Nonpriority Creditor's Name <b>PO Box 3918</b> Number      Street  <b>97208</b> City              State              ZIP Code	Last 4 digits of account number  When was the debt incurred?	<u>8 1 0 1</u>	\$164,584.56
<p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input checked="" type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p> <p><b>Type of NONPRIORITY unsecured claim:</b>  <input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <u>Loan</u></p>				
<p><b>4.27 Shopify Capital</b> Nonpriority Creditor's Name <b>700 Shockoe Slip 2nd Floor</b> Number      Street  <b>Richmond, VA 23219</b> City              State              ZIP Code</p> <p>Last 4 digits of account number  When was the debt incurred?</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input checked="" type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b>  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p> <p><b>Type of NONPRIORITY unsecured claim:</b>  <input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <u>Loan</u></p>				

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.28</b> <u>Shopify Inc.</u> Nonpriority Creditor's Name <u>33 New Montgomery St. 750</u> Number Street <u>San Francisco, CA 94105</u> City State ZIP Code	Last 4 digits of account number _____ <u>When was the debt incurred?</u> _____	<u>\$3,478.47</u>
<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>		
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>4.29</b> <u>Spire</u> Nonpriority Creditor's Name <u>100 Market Street</u> Number Street <u>Saint Louis, MO 63101</u> City State ZIP Code		
Last 4 digits of account number _____ <u>When was the debt incurred?</u> _____		
<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Utility</u>		
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.30	<b>Uline</b> Nonpriority Creditor's Name <b>12575 Uline Dr.</b> Number Street	Last 4 digits of account number	<u>9</u> <u>6</u> <u>5</u> <u>1</u>	\$1,530.59
		When was the debt incurred?		
	<b>Blue River, WI 53518</b> City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Who incurred the debt?</b> Check one.	<b>Type of NONPRIORITY unsecured claim:</b>		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Vendor</u>		
	<b>Is the claim subject to offset?</b>			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.31	<b>UPS</b> Nonpriority Creditor's Name <b>PO Box 809488</b> Number Street	Last 4 digits of account number	<u>0</u> <u>V</u> <u>7</u> <u>0</u>	\$6,411.44
		When was the debt incurred?		
	<b>Chicago, IL 60680</b> City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<b>Who incurred the debt?</b> Check one.	<b>Type of NONPRIORITY unsecured claim:</b>		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Vendor</u>		
	<b>Is the claim subject to offset?</b>			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

<b>4.32</b> <u>US Bank/RMS</u> Nonpriority Creditor's Name <u>Attn: Bankruptcy</u> <u>PO Box 5229</u> Number Street <u>Cincinnati, OH 45201-5229</u> City State ZIP Code	Last 4 digits of account number <u>7 3 8 6</u> When was the debt incurred? <u>10/1/2023</u>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Total claim</b> <u>\$4,075.00</u>
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>4.33</b> <u>US Food</u> Nonpriority Creditor's Name <u>8543 Page Ave</u> Number Street <u>Saint Louis, MO 63114</u> City State ZIP Code		
Last 4 digits of account number <u>8 0 5 4</u> When was the debt incurred?		
<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> <b>Check if this claim is for a community debt</b>		
<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Vendor</u>		
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

4.34	<b>Velocity Credit Group</b>	Last 4 digits of account number	<u>6 2 4 7</u>	\$36,288.00
Nonpriority Creditor's Name				
<b>333 Pearsall Ave</b>	When was the debt incurred?			
Number Street				
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Cedarhurst, NY 11516				
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Credit Card</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.35	<b>Wells Fargo Bank NA</b>	Last 4 digits of account number	<u>0 1 4 3</u>	\$5,340.00
Nonpriority Creditor's Name				
<b>Attn: Bankruptcy</b>	When was the debt incurred?			<u>10/1/2023</u>
1 Home Campus MAC X2303-01A 3rd Floor				
Number Street				
As of the date you file, the claim is: Check all that apply.				
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				
Des Moines, IA 50328				
City	State	ZIP Code		
Who incurred the debt? Check one.				
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt				
Type of NONPRIORITY unsecured claim:				
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>CreditCard</u>				
Is the claim subject to offset?				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

GaryZink

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**1. Steve Klapman**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**5500 Pearl St. 250**Line 4.18 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Number Street

Last 4 digits of account number \_\_\_\_\_

**Des Plaines, IL 60018**

City State ZIP Code

**2. Gene W. Rosen**

On which entry in Part 1 or Part 2 did you list the original creditor?

Name  
**200 Garden City Plaza 405**Line 4.34 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Number Street

Last 4 digits of account number \_\_\_\_\_

**Garden City, NY 11530**

City State ZIP Code

Debtor 1

GaryZink

Case number (if known) \_\_\_\_\_

Debtor 2

PamelaZink

First Name

Middle Name

Last Name

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.  
Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	<u>\$0.00</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$531,017.98</u>
	6j. Total. Add lines 6f through 6i.	<u>\$531,017.98</u>

Fill in this information to identify your case:

Debtor 1	<u>Gary</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Pamela</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Missouri</u>		
Case number (if known)			

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<u>Grace Co LLC</u> Name <u>606 Martin Pointe St</u> Number Street <u>Ballwin, MO 63011</u> City State ZIP Code	Rental Contract to be REJECTED
2.2	<u>Landlord Unknown</u> Name <u>307 Meadowview Ter</u> Number Street <u>Lynn Haven, FL 32444</u> City State ZIP Code	Rental Contract to be ASSUMED
2.3	Name Number Street City State ZIP Code	
2.4	Name Number Street City State ZIP Code	

Fill in this information to identify your case:

Debtor 1	<u>Gary</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Pamela</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western</u>	District of	<u>Missouri</u>
Case number (if known)			

 Check if this is an amended filingOfficial Form 106H**Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No  
 Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent

Number Street

City State ZIP Code

3. **In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

**Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.1	<b>KBosh Food LLC</b>	Name	<input type="checkbox"/> Schedule D, line _____ <input checked="" type="checkbox"/> Schedule E/F, line 4.1, 4.4, 4.6, 4.7, 4.13, 4.14, 4.15, 4.16, 4.17, 4.18, 4.19, 4.20, 4.21, 4.23, 4.24, 4.25, 4.26, 4.27, 4.28, 4.30, 4.31, 4.33, 4.34
		Number Street	<input type="checkbox"/> Schedule G, line _____
		City State ZIP Code	
3.2		Name	<input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____
		Number Street	
		City State ZIP Code	

Fill in this information to identify your case:

Debtor 1	<b>Gary</b>	<b>Zink</b>
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	<b>Pamela</b>	<b>Zink</b>
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	<b>Western District of Missouri</b>	
Case number (if known)		

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not Employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not Employed
Occupation		
Employer's name		
Employer's address	Number Street	Number Street
	City	State Zip Code
	City	State Zip Code
How long employed there?		

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	2. <u>\$0.00</u>	<u>\$0.00</u>
3. Estimate and list monthly overtime pay.	3. + <u>\$0.00</u>	<u>\$0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$0.00</u>	<u>\$0.00</u>

Debtor 1  
Debtor 2

Gary  
Pamela

Zink  
Zink

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here.....</b> →	<b>4.</b>	<b>\$0.00</b>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a.	<b>\$0.00</b>
5b. Mandatory contributions for retirement plans	5b.	<b>\$0.00</b>
5c. Voluntary contributions for retirement plans	5c.	<b>\$0.00</b>
5d. Required repayments of retirement fund loans	5d.	<b>\$0.00</b>
5e. Insurance	5e.	<b>\$0.00</b>
5f. Domestic support obligations	5f.	<b>\$0.00</b>
5g. Union dues	5g.	<b>\$0.00</b>
5h. Other deductions. Specify: _____	5h.	<b>\$0.00</b>
	+	<b>\$0.00</b>
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	<b>6.</b>	<b>\$0.00</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	<b>7.</b>	<b>\$0.00</b>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	<b>\$0.00</b>
8b. Interest and dividends	8b.	<b>\$0.00</b>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	<b>\$0.00</b>
8d. Unemployment compensation	8d.	<b>\$0.00</b>
8e. Social Security	8e.	<b>\$3,004.00</b>
8f. Other government assistance that you regularly receive  Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: _____	8f.	<b>\$0.00</b>
8g. Pension or retirement income	8g.	<b>\$1,200.00</b>
8h. Other monthly income. Specify: _____	8h.	<b>\$0.00</b>
	+	<b>\$0.00</b>
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	<b>9.</b>	<b>\$4,204.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	<b>\$4,204.00</b>
	+	<b>\$1,400.00</b>
		<b>\$5,604.00</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b>  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify: _____	11.	<b>\$0.00</b>
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12.	<b>\$5,604.00</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	<u>Gary</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Pamela</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Missouri</u>		
Case number (if known)			

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:  
 \_\_\_\_\_  
 MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

##### 1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

##### 2. Do you have dependents?

No

- Do not list Debtor 1 and Debtor 2.  
 Do not state the dependents' names.
- Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.
_____	_____	<input type="checkbox"/> No. <input type="checkbox"/> Yes.

##### 3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

##### 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$2,500.00

If not included in line 4:

- |   |                   |
|---|-------------------|
| 4a. Real estate taxes                             | 4a. <u>\$0.00</u> |
| 4b. Property, homeowner's, or renter's insurance  | 4b. <u>\$0.00</u> |
| 4c. Home maintenance, repair, and upkeep expenses | 4c. <u>\$0.00</u> |
| 4d. Homeowner's association or condominium dues   | 4d. <u>\$0.00</u> |

Debtor 1  
Debtor 2

**Gary**  
**Pamela**

**Zink**  
**Zink**

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

			<b>Your expenses</b>
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5.	<b>\$0.00</b>
6.	<b>Utilities:</b>		
6a.	Electricity, heat, natural gas	6a.	<b>\$150.00</b>
6b.	Water, sewer, garbage collection	6b.	<b>\$0.00</b>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	<b>\$215.00</b>
6d.	Other. Specify: _____	6d.	<b>\$0.00</b>
7.	<b>Food and housekeeping supplies</b>	7.	<b>\$800.00</b>
8.	<b>Childcare and children's education costs</b>	8.	<b>\$0.00</b>
9.	<b>Clothing, laundry, and dry cleaning</b>	9.	<b>\$100.00</b>
10.	<b>Personal care products and services</b>	10.	<b>\$0.00</b>
11.	<b>Medical and dental expenses</b>	11.	<b>\$150.00</b>
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	<b>\$200.00</b>
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13.	<b>\$850.00</b>
14.	<b>Charitable contributions and religious donations</b>	14.	<b>\$0.00</b>
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a.	<b>\$0.00</b>
15b.	Health insurance	15b.	<b>\$0.00</b>
15c.	Vehicle insurance	15c.	<b>\$0.00</b>
15d.	Other insurance. Specify: _____	15d.	<b>\$0.00</b>
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	<b>\$0.00</b>
17.	<b>Installment or lease payments:</b>		
17a.	Car payments for Vehicle 1 <u>2019 Dodge Caravan</u>	17a.	<b>\$364.00</b>
17b.	Car payments for Vehicle 2 <u>2014 Chrysler Town and Country</u>	17b.	<b>\$237.00</b>
17c.	Other. Specify: _____	17c.	<b>\$0.00</b>
17d.	Other. Specify: _____	17d.	<b>\$0.00</b>
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18.	<b>\$0.00</b>
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19.	<b>\$0.00</b>
20.	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a.	Mortgages on other property	20a.	<b>\$0.00</b>
20b.	Real estate taxes	20b.	<b>\$0.00</b>
20c.	Property, homeowner's, or renter's insurance	20c.	<b>\$0.00</b>
20d.	Maintenance, repair, and upkeep expenses	20d.	<b>\$0.00</b>
20e.	Homeowner's association or condominium dues	20e.	<b>\$0.00</b>

Debtor 1  
Debtor 2

**Gary**  
**Pamela**

**Zink**  
**Zink**

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

21. Other. Specify: \_\_\_\_\_

21. + \_\_\_\_\_ \$0.00

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \_\_\_\_\_ \$5,566.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \_\_\_\_\_ \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \_\_\_\_\_ \$5,566.00

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23a. \_\_\_\_\_ \$5,604.00

23b. Copy your monthly expenses from line 22c above.

23b. - \_\_\_\_\_ \$5,566.00

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23c. \_\_\_\_\_ \$38.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

None

Yes.

Fill in this information to identify your case:

Debtor 1	<b>Gary</b>	<b>Zink</b>
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	<b>Pamela</b>	<b>Zink</b>
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	<b>Western District of Missouri</b>	
Case number (if known)		

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

#### Part 1: Summarize Your Assets

##### Your assets

Value of what you own

##### 1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	<b>\$2,500.00</b>
1b. Copy line 62, Total personal property, from Schedule A/B.....	<b>\$34,220.14</b>
1c. Copy line 63, Total of all property on Schedule A/B.....	<b>\$36,720.14</b>

#### Part 2: Summarize Your Liabilities

##### Your liabilities

Amount you owe

##### 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of Schedule D.....	<b>\$26,435.00</b>
---	--------------------

##### 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	<b>\$0.00</b>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	<b>+ \$531,017.98</b>

##### Your total liabilities

**\$557,452.98**

#### Part 3: Summarize Your Income and Expenses

##### 4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	<b>\$5,604.00</b>
---	-------------------

##### 5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	<b>\$5,566.00</b>
---	-------------------

Debtor 1  
Debtor 2

Gary  
Pamela

First Name

Zink  
Zink

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

7. What kind of debt do you have?

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations (Copy line 6a.)

9b. Taxes and certain other debts you owe the government. (Copy line 6b.)

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

9d. Student loans. (Copy line 6f.)

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

+ \_\_\_\_\_

9g. **Total**. Add lines 9a through 9f.

Fill in this information to identify your case:

Debtor 1	<u>Gary</u> First Name	<u>Zink</u> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Pamela</u> First Name	<u>Zink</u> Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Missouri</u>		
Case number (if known)	_____		

Check if this is an amended filing

## Official Form 106Dec

### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

#### Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No  
 Yes. Name of person \_\_\_\_\_ Attach *Bankruptcy Petitioner's Notice, Declaration, and Signature (Official Form 119)*.

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Gary Zink  
Gary Zink, Debtor 1

Date 05/07/2024  
MM/ DD/ YYYY

X /s/ Pamela Zink  
Pamela Zink, Debtor 2

Date 05/07/2024  
MM/ DD/ YYYY

Fill in this information to identify your case:

Debtor 1	<b>Gary</b>	<b>Zink</b>
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	<b>Pamela</b>	<b>Zink</b>
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the:	<b>Western District of Missouri</b>	
Case number (if known)		

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

##### 1. What is your current marital status?

Married

Not married

##### 2. During the last 3 years, have you lived anywhere other than where you live now?

No

Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
17281 Front Beach Rd. Number Street	From <u>01/01/2021</u> To <u>02/02/2023</u>	<input checked="" type="checkbox"/> Same as Debtor 1	<input checked="" type="checkbox"/> Same as Debtor 1 From _____ To _____
Panama City Beach, FL 32413 City State ZIP Code	Number Street City State ZIP Code	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
Number Street City State ZIP Code	From _____ To _____ Number Street City State ZIP Code	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____ Number Street City State ZIP Code

##### 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1  
Debtor 2Gary  
Pamela

First Name Middle Name Last Name

Zink  
Zink

Case number (if known) \_\_\_\_\_

**Part 2: Explain the Sources of Your Income****4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

 No Yes. Fill in the details.

	<b>Debtor 1</b>	<b>Debtor 2</b>		
	<b>Sources of income</b> Check all that apply.	<b>Gross Income</b> (before deductions and exclusions)	<b>Sources of income</b> Check all that apply.	<b>Gross Income</b> (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business		
<b>For last calendar year:</b> (January 1 to December 31, <u>2023</u> ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business		
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2022</u> ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business		

**5. Did you receive any other income during this year or the two previous calendar years?**Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. No Yes. Fill in the details.

	<b>Debtor 1</b>	<b>Debtor 2</b>		
	<b>Sources of income</b> Describe below.	<b>Gross income from each source</b> (before deductions and exclusions)	<b>Sources of income</b> Describe below.	<b>Gross Income from each source</b> (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<u>Social Security</u> <u>\$12,016.00</u> <u>Pension</u> <u>\$4,800.00</u>	<u>Social Security</u> <u>\$5,600.00</u>		
<b>For last calendar year:</b> (January 1 to December 31, <u>2023</u> ) YYYY	<u>Social Security</u> <u>\$36,048.00</u> <u>Pension</u> <u>\$14,400.00</u>	<u>Social Security</u> <u>\$16,800.00</u>		
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2022</u> ) YYYY	<u>Social Security</u> <u>\$36,048.00</u> <u>Pension</u> <u>\$14,400.00</u>	<u>Social Security</u> <u>\$16,800.00</u>		

Debtor 1  
Debtor 2Gary  
Pamela

First Name

Middle Name

Zink  
Zink

Last Name

Case number (if known) \_\_\_\_\_

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575\* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$7,575\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name	_____	_____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number Street	_____	_____	
City	State	ZIP Code	

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name	_____	_____	_____
Number Street	_____	_____	_____
City	State	ZIP Code	_____

Debtor 1  
Debtor 2Gary  
Pamela

First Name

Middle Name

Zink  
Zink

Last Name

Case number (if known) \_\_\_\_\_

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**  
Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider.

Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name			
Number Street			
City State ZIP Code			

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Suit on Account	Supreme Court of the State of <u>New York</u> Court Name	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number	Number Street	City State ZIP Code

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**  
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.

Debtor 1  
Debtor 2

**Gary  
Pamela**

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

Creditor's Name

Number Street

City State ZIP Code

**Describe the property**

Date

**Value of the property**

**Explain what happened**

- Property was repossessed.
- Property was foreclosed.
- Property was garnished.
- Property was attached, seized, or levied.

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

No

Yes. Fill in the details.

**Describe the action the creditor took**

Date action was taken Amount

Creditor's Name

Number Street

City State ZIP Code

Last 4 digits of account number: XXXX-\_\_\_\_\_

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

No

Yes

**Part 5: List Certain Gifts and Contributions**

**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

No

Yes. Fill in the details for each gift.

Debtor 1  
Debtor 2

**Gary**  
**Pamela**

First Name      Middle Name

**Zink**  
**Zink**

Last Name

Case number (if known) \_\_\_\_\_

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			
Number Street			
City	State ZIP Code		
Person's relationship to you _____			

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?**

<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes. Fill in the details for each gift or contribution.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name			
Number Street			
City	State ZIP Code		

**Part 6: List Certain Losses**

**15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes. Fill in the details.		
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		

Debtor 1  
Debtor 2Gary  
Pamela

First Name      Middle Name

Zink  
Zink

Last Name

Case number (if known) \_\_\_\_\_

## Part 7: List Certain Payments or Transfers

**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

 No Yes. Fill in the details.

		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<b>Pontello &amp; Bressler, LLC</b>				
Person Who Was Paid				
<b>406 Boones Lick Rd.</b>		<b>Attorney's Fees of \$2072.00, Filing Fees of \$338.00, and Credit Reporting Fees of \$90.00.</b>	<b>5/2/2024</b>	<b>\$2,500.00</b>
Number Street				
<b>Saint Charles, MO 63301</b>				
City	State	ZIP Code		
Email or website address				
Person Who Made the Payment, if Not You				

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

 No Yes. Fill in the details.

		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid				
Number Street				
City	State	ZIP Code		

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).

Do not include gifts and transfers that you have already listed on this statement.

 No Yes. Fill in the details.

Debtor 1  
Debtor 2**Gary  
Pamela**

First Name

Middle Name

Last Name

**Zink  
Zink**

Case number (if known) \_\_\_\_\_

Person Who Received Transfer

Number Street

City State ZIP Code

Person's relationship to you \_\_\_\_\_

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made

**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)** No Yes. Fill in the details.

	Description and value of the property transferred	Date transfer was made
Name of trust _____		

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units****20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

 No Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
---------------------------------	-------------------------------	--	---

**First Community Credit Union**

Name of Financial Institution

XXXX-\_\_\_\_\_

 Checking04/24/2024\$0.00 Savings Money market Brokerage Other \_\_\_\_\_

Number Street

MO

City State ZIP Code

Debtor 1  
Debtor 2Gary  
Pamela

First Name

Middle Name

Zink  
Zink

Last Name

Case number (if known) \_\_\_\_\_

**21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?** No Yes. Fill in the details.

Who else had access to it?		Describe the contents		Do you still have it?
Name of Financial Institution	Name			
Number Street	Number	Street		
City	State	ZIP Code		
City	State	ZIP Code		

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?** No Yes. Fill in the details.

Who else has or had access to it?		Describe the contents		Do you still have it?
Name of Storage Facility	Name			
Number Street	Number	Street		
City	State	ZIP Code		
City	State	ZIP Code		

**Part 9: Identify Property You Hold or Control for Someone Else****23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.** No Yes. Fill in the details.

Debtor 1  
Debtor 2Gary  
Pamela

First Name

Middle Name

Last Name

Zink  
Zink

Case number (if known) \_\_\_\_\_

Owner's Name

Number Street

Number Street

City State ZIP Code

City State ZIP Code

## Describe the property

## Value

## Part 10: Give Details About Environmental Information

## For the purpose of Part 10, the following definitions apply:

- *Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- *Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- *Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

## 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

 No Yes. Fill in the details.

	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
		City State ZIP Code	
City	State ZIP Code		

## 25. Have you notified any governmental unit of any release of hazardous material?

 No Yes. Fill in the details.

Debtor 1  
Debtor 2Gary  
Pamela

First Name

Middle Name

Last Name

Zink  
Zink

Case number (if known) \_\_\_\_\_

Name of site

Governmental unit

Environmental law, if you know it

Date of notice

Number Street

Number Street

City State ZIP Code

City State ZIP Code

**26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.** No Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title _____ Court Name _____	Number Street _____	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Case number _____ City State ZIP Code _____		

**Part 11: Give Details About Your Business or Connections to Any Business****27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
 A member of a limited liability company (LLC) or limited liability partnership (LLP)  
 A partner in a partnership  
 An officer, director, or managing executive of a corporation  
 An owner of at least 5% of the voting or equity securities of a corporation  
 No. None of the above applies. Go to Part 12.

 Yes. Check all that apply above and fill in the details below for each business.

KBosh Food LLC

Name \_\_\_\_\_

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Describe the nature of the business

Employer Identification number  
Do not include Social Security number or ITIN.  
EIN: 8 2 - 3 6 5 7 9 1 5

Name of accountant or bookkeeper

Dates business existed

From \_\_\_\_\_ To \_\_\_\_\_

Debtor 1  
Debtor 2

Gary  
Pamela  
First Name      Middle Name      Last Name

Case number (if known) \_\_\_\_\_

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued

Name \_\_\_\_\_ MM / DD / YYYY

Number Street \_\_\_\_\_

City State ZIP Code \_\_\_\_\_

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Gary Zink  
Signature of Gary Zink, Debtor 1

X /s/ Pamela Zink  
Signature of Pamela Zink, Debtor 2

Date 05/07/2024

Date 05/07/2024

Did you attach additional pages to your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	<u>Gary</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<u>Pamela</u>	<u>Zink</u>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Missouri</u>		
Case number (if known)			

Check if this is an amended filing

## Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: <u>First Community Credit Union</u>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property securing debt: <u>2019 Dodge Caravan</u>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]:	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Creditor's name: <u>First Community Credit Union</u>	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input checked="" type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]:	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: <u>2014 Chrysler Town and Country</u>		

Debtor 1  
Debtor 2

Gary  
Pamela

Zink  
Zink

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Lessor's name: Grace Co LLC

No

Yes

Description of leased property: Rental

Lessor's name: Landlord

No

Yes

Description of leased property: Rental

Lessor's name:

No

Yes

Description of leased property:

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Gary Zink

Signature of Debtor 1

X /s/ Pamela Zink

Signature of Debtor 2

Date 05/07/2024

MM/ DD/ YYYY

Date 05/07/2024

MM/ DD/ YYYY

B2030 (Form 2030) (12/15)

United States Bankruptcy Court  
Western District of Missouri

In re Zink, Gary

Zink, Pamela

Case No. \_\_\_\_\_

Debtor

Chapter \_\_\_\_\_ 7

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... **\$2,072.00**

Prior to the filing of this statement I have received ..... **\$0.00**

Balance Due ..... **\$2,072.00**

2. The source of the compensation paid to me was:

Debtor       Other (specify)

3. The source of compensation to be paid to me is:

Debtor       Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor' s financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

05/07/2024

Date

/s/ Dominic Pontello

Dominic Pontello  
*Signature of Attorney*

Bar Number: 60947  
Pontello & Bressler, LLC  
406 Boones Lick Rd.  
Saint Charles, MO 63301  
Phone: (636) 896-4170

Pontello & Bressler, LLC

Name of law firm

Fill in this information to identify your case:

Debtor 1	<b>Gary</b>	<b>Zink</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Pamela</b>	<b>Zink</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Western District of Missouri</b>		
Case number (if known)			

 Check if this is an amended filing**Official Form 122A-1Supp****Statement of Exemption from Presumption of Abuse Under § 707(b)(2)**

12/15

File this supplement together with *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

**Part 1: Identify the Kind of Debts You Have**

1. **Are your debts primarily consumer debts?** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the *Voluntary Petition* (Official Form 101).

- No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.
- Yes. Go to Part 2.

**Part 2: Determine Whether Military Service Provisions Apply to You**

2. **Are you a disabled veteran** (as defined in 38 U.S.C. § 3741(1))?

- No. Go to line 3.
- Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).
- No. Go to line 3.
- Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

3. **Are you or have you been a Reservist or member of the National Guard?**

- No. Complete Form 122A-1. Do not submit this supplement.
- Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Check any one of the following categories that applies:

- I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.
- I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.
- I am performing a homeland defense activity for at least 90 days.
- I performed a homeland defense activity for at least 90 days, ending on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, *The Means Test does not apply now*, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The *exclusion period* means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later

Fill in this information to identify your case:

Debtor 1	<b>Gary</b>	<b>Zink</b>	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	<b>Pamela</b>	<b>Zink</b>	
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>Western District of Missouri</b>		
Case number (if known)			

Check one box only as directed in this form and in Form 122A-1Supp:

1. There is no presumption of abuse.
2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
3. The Means Test does not apply now because of qualified military service but it could apply later.
- Check if this is an amended filing

**Official Form 122A-1****Chapter 7 Statement of Your Current Monthly Income**

12/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

**Part 1: Calculate Your Current Monthly Income****1. What is your marital and filing status? Check one only.**

- Not married.** Fill out Column A, lines 2-11.
- Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- Married and your spouse is NOT filing with you. You and your spouse are:**
- Living in the same household and are not legally separated.** Fill out both Column A and B, lines 2-11.
  - Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
----------------------	--

**2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).**

---

---

**3. Alimony and maintenance payments.** Do not include payments from a spouse if Column B is filled in.

---

---

**4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.** Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.

---

---

**5. Net income from operating a business, profession, or farm**

Debtor 1      Debtor 2

Gross receipts (before all deductions)

---

---

Ordinary and necessary operating expenses

---

---

Net monthly income from a business, profession, or farm

---

---

Copy here  
→

---

---

**6. Net income from rental and other real property**

Debtor 1      Debtor 2

Gross receipts (before all deductions)

---

---

Ordinary and necessary operating expenses

---

---

Net monthly income from rental or other real property

---

---

Copy here  
→

---

---

**7. Interest, dividends, and royalties**

First Name

Middle Name

Last Name

**Column A**  
**Debtor 1****Column B**  
**Debtor 2 or  
non-filing spouse****8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under

the Social Security Act. Instead, list it here: ..... ↓

For you.....

For your spouse.....

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

**10. Income from all other sources not listed above.** Specify the source and amount.

Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

Total amounts from separate pages, if any.

**11. Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

_____	_____	_____
+ _____	+ _____	= _____
_____	_____	_____

Total current  
monthly income

**Part 2: Determine Whether the Means Test Applies to You**

**12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11.....

Copy line 11 here →

X 12

Multiply by 12 (the number of months in a year).

12b. The result is your annual income for this part of the form.

12b.

\_\_\_\_\_

**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

_____
-------

Fill in the number of people in your household.

_____
-------

Fill in the median family income for your state and size of household.....

13.

\_\_\_\_\_

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**

14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*  
Go to Part 3.

14b.  Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*  
Go to Part 3 and fill out Form 122A-2.

First Name

Middle Name

Last Name

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Gary Zink

Signature of Debtor 1

Date 05/07/2024

MM/ DD/ YYYY

X /s/ Pamela Zink

Signature of Debtor 2

Date 05/07/2024

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

IN THE UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF MISSOURI  
JEFFERSON CITY DIVISION

IN RE: Zink, Gary  
Zink, Pamela

CASE NO  
CHAPTER 7

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 05/07/2024 Signature /s/ Gary Zink  
Gary Zink, Debtor

Date 05/07/2024 Signature /s/ Pamela Zink  
Pamela Zink, Joint Debtor



Amazon Capital Services  
410 Terry Ave N  
Seattle, WA 98109

Ameren  
PO Box 88068  
Chicago, IL 60680

American Express  
PO Box 6031  
Carol Stream, IL 60197

American Express Gold  
PO Box 6031  
Carol Stream, IL 60197

Amex  
Correspondence/Bankruptcy  
PO Box 981540  
El Paso, TX 79998-1540

Attentive Mobile Inc.  
221 River St. 9047  
Hoboken, NJ 07030

Bug Out  
PO Box 740608  
Cincinnati, OH 45274

CFNA  
Attn: Bankruptcy  
PO Box 81315  
Cleveland, OH 44181-0315

Chase Card Services  
Attn: Bankruptcy P.O. 15298  
Wilmington, DE 19850

Citibank  
Citicorp Cr Svcs/Centralized Bankruptcy  
PO Box 790040  
St Louis, MO 63179-0040

Costco Citi Card  
Attn: Bankruptcy  
PO Box 6500  
Sioux Falls, SD 57117

Discover Financial  
Attn: Bankruptcy  
PO Box 3025  
New Albany, OH 43054

Emotive  
11390 W Olympic Blvd  
Los Angeles, CA 90015

Fed Ex  
PO Box 94515  
Palatine, IL 60094

First Community Credit Union  
Attn: Bankruptcy  
PO Box 1030  
Chesterfield, MO 63006

Gene W. Rosen  
200 Garden City Plaza 405  
Garden City, NY 11530

Goldman Saks Bank  
PO Box 45400  
Salt Lake City, UT 84145

Griff Paper and Film  
275 Lower Morrisville Rd  
Levittown, PA 19054

I44 Cold Storage  
4550 W Junction St.  
Springfield, MO 65802

IHeart Media  
5500 Pearl St. 250  
Des Plaines, IL 60018

Intuit Financing Inc.  
2700 Cast Ave  
Mountain View, CA 94043

Kapitus Servicing  
2500 Wilson Blvd. 350  
Arlington, VA 22201

Paypal Working Capital  
Executive Escalation  
PO Box 45950  
Omaha, NE 68145

Pentagon Federal Credit  
Union  
Attn: Bankruptcy 2930 Eisenhower  
Avenue  
Alexandria, VA 22314

Rapid Finance  
4500 East West Highway  
Bethesda, MD 20814

Republic Services  
12976 St. Charles Rock Rd.  
Bridgeton, MO 63044

Route App  
1557 W Innovation Way 200  
Lehi, UT 84043

SBA  
PO Box 3918  
97208

Shopify Capital  
700 Shockoe Slip 2nd Floor  
Richmond, VA 23219

Shopify Inc.  
33 New Montgomery St. 750  
San Francisco, CA 94105

Spire  
100 Market Street  
Saint Louis, MO 63101

Steve Klapman  
5500 Pearl St. 250  
Des Plaines, IL 60018

Uline  
12575 Uline Dr.  
Blue River, WI 53518

UPS  
PO Box 809488  
Chicago, IL 60680

US Bank/RMS  
Attn: Bankruptcy  
PO Box 5229  
Cincinnati, OH 45201-5229

US Food  
8543 Page Ave  
Saint Louis, MO 63114

Velocity Credit Group  
333 Pearsall Ave  
Cedarhurst, NY 11516

Wells Fargo Bank NA  
Attn: Bankruptcy 1 Home Campus MAC  
X2303-01A 3rd Floor  
Des Moines, IA 50328